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Bib Data Sheet

CONFIRMATION NO. 8232

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|---|---|------------------------|---|-------------------------------------|
| SERIAL NUMBER 09/954,927 | FILING DATE 09/18/2001 RULE <i>RDR</i> | CLASS 705 | GROUP ART UNIT 2161 | ATTORNEY DOCKET NO. 0827.0005 |
| APPLICANTS James A. Porterfield, Hudson, OH; <i>RDR 11/14/05</i> | | | | |
| ** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/255,440 12/14/2000 <i>RDR 11/14/05</i> | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY ** ** 10/16/2001 <i>RDR 11/14/05</i> | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged | Examiner's Signature _____ Initials _____ | STATE OR COUNTRY OH | SHEETS DRAWING 20 | TOTAL CLAIMS 20 |
| INDEPENDENT CLAIMS 3 | | | | |
| ADDRESS Daniel A. Thomson, Esq. One Cascade Plaza, Fourteenth Floor Akron, OH 44308-1147 | | | | |
| TITLE Software and method of coding treatment and recording progress of rehabilitation services | | | | |
| FILING FEE RECEIVED 355 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |